NPE		PART B	- FEE(S)	TRANSMITTAL			
Complete and send	this form, together w	ith applicable	Commissione P.O. Box 1450 Alexandria, V	r for Patents ) 'irginia 22313-1450			
· \2	Æ/			Fax (571)-273-288	5	· ·	
INSTRUCTIONS: This for appropriate All further continuing indicated unless of applied haintenance fee notification	me Mould be used for transported the including the selection or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and ders and noti ) specifying	PUBLICATION FEE (if fication of maintenance for a new correspondence add	required). Blocks 1 through 5 ces will be mailed to the curre tress; and/or (b) indicating a se	should be completed where nt correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
LOWE HAUPTMAN BERNER, LLP 1700 DIAGONAL ROAD SUITE 300 ALEXANDRIA, VA 22314				I hereby certify the States Postal Servaddressed to the transmitted to the	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
ALEXANDRIA, VA 22314				2hris	stina J. Frye	(Depositor's name)	
। । ।			Alex	August 14, 2006 (Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/664,886 09/22/2003 Yi-Sheng Yu 4006-266 4261  TITLE OF INVENTION: PLASMA DISPLAY PANEL WITH COLOR SPACE TRANSFORMATION DEVICER8/15/2006 CNGUYEN1 00000057 10664886							
d.				0) 02	FC:1501 FC:1504	1400.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE		FU: 800 OTAL FEE(S) DUE	DATE DU BU UP	
nonprovisional	NO	\$1400		\$300	\$1700	08/21/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS		:	
SHAPIRO, LEONID		2629		345-063000	<del></del>		
Address of correspondence address or indication of "Fee Address" (37 FR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
Ç	RESIDENCE DATA TO B			• • • •			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Chunghwa Picture Tubes, Ltd. Taiwan, R.O.C.  Please check the appropriate assignce category or categories (will not be printed on the patent):							
Please check the appropriate	assignee category or categor	ries (will not be pri	nted on the pa	atent): 🔲 Individual 🤄	Corporation or other private	group entity Government	
The following fee(s) are enclosed:  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.							
Publication Fee (No small entity discount permitted)				ayment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies 2 Depo				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-1337 (enclose an extra copy of this form).			
· _ ·	from status indicated above	•	<b>D.</b>			CDD 1.08/ \/0\	
	ALL ENTLY status. See a s requested to apply the Issu blication Fee (it required) w				MALL ENTITY status. See 37 ously paid issue fee to the application of agent; or agent; or		
	A)	ant and 11ademark	Onice				
Authorized Signature  Typed or printed pame Herijamin J. Hauptman			Date August 14, 2006  Registration No. 29,310				
Typed or printed name	Berjamin J. Ha	uptman		Registrati	on No. 29 - 310		
Typed or printed name	77		n is saminad	•	on No. 29,310  by the public which is to file (12 minutes to complete, inclusy comments on the amount of and Trademark Office, U.S. D. RESS. SEND TO: Commission	and by the LISPTO to amount	